NEVADA DEPARTMENT OF CORRECTIONS	SERIES 600 HEALTH CARE SERVICES	SUPERSEDES: AR653 (08/30/93)
ADMINISTRATIVE REGULATIONS MANUAL	ADMINISTRATIVE REGULATION 653 ADMISSION AND DISCHARGE OF MENTAL HEALTH INMATES TEMP	EFFECTIVE DATE: 12/17/03

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MANDATORY REVIEW DATE 12/17/04

## **PURPOSE**

To define the process of moving inmates into and out of the Department's Mental Health Units.

To describe the various transfer requirements and prohibitions associated with these units.

# **AUTHORITY**

NRS 209.131

NRS 209.351

## RESPONSIBILITY

All staff will have the responsibility to have knowledge of and comply with this regulation.

## **DEFINITIONS**

**DEPARTMENT** – The Nevada Department of Corrections.

**INTERDISCIPLINARY CLASSIFICATION COMMITTEE** – A committee consisting of the Warden/designee, caseworker, and a mental health professional, including but not limited to: a psychiatrist, psychologist, or psychiatric nurse regarding admission and discharge from MHU.

**MENTAL HEALTH TEAM** – A psychiatrist, psychologist, clinical social worker, and a psychiatric or correctional nurse who meet for the purpose of treatment planning for inmates with mental health problems and admissions and discharges.

#### **APPLICABILITY**

This regulation applies to all inmates housed within the Department.

## **PROCEDURES**

## 653.01 ADMISSION AND DISCHARGE OF MENTAL HEALTH INMATES

- 1.1 The movement of inmates to a Mental Health Unit of the Department will follow the classification procedure set forth in the Department's Administrative Regulation 503.
- 1.2 For evaluation for admission to a Mental Health Unit, the Mental Health Team at the institution housing the inmate will:
  - 1.2.1 Conduct a clinical interview and appropriate psychological assessment.
  - 1.2.2 Initiate crisis intervention procedures, as appropriate.
  - 1.2.3 Document, in writing, the nature of the psychiatric problem.
  - 1.2.4 Estimate the degree of urgency entailed:
    - <u>Category I</u> Immediate, i.e., high risk circumstances;
    - <u>Category II</u> Urgent (non-emergency), as soon as practical;
    - Category III Elective (non-urgent), may be scheduled.
- 1.3 Mental Health Unit Admissions; Voluntary/Involuntary:
  - 1.3.1 After proper assessment an inmate may be admitted on a voluntary basis, or as an

involuntary admission. (3-4368)

- 1.3.2 Voluntary Admission to MHU requires only:
  - An order by a physician, psychiatrist, or mid-level practitioner that authorizes the admission; and
  - A signed consent form indicating the inmate's agreement with the admission.
- 1.3.2 Involuntary Admission:
  - 1.3.2.1 If an inmate refuses to sign the admission consent form and the staff has determined the admission is necessary for safety or evaluation purposes, the inmate's refusal to concur with the admission will be regarded as an involuntary admission subject to the following steps:
    - Written notice must be given to the inmate;
    - The notice will serve to inform the inmate that admission to MHU is being considered for mental health reasons and that a hearing has been scheduled to determine the need for this housing change/admission to an MHU; and
    - The notice will include the date and time of the hearing.
  - 1.3.2.2 A hearing before an Interdisciplinary Classification Committee will be scheduled within five (5) working days of admission.
    - Membership of the Interdisciplinary Committee will consist of the Warden/designee and two mental health professionals who are not directly involved in the diagnosis or treatment of the inmate.
  - 1.3.2.3 At the hearing, the Committee will consider all relevant information which relates to the decision by mental health staff to admit the inmate.
    - The inmate will have the opportunity to see or discuss such information and to present any other information on their behalf that is reasonable and available.
  - 1.3.2.4 The inmate may be provided with access to a mental health staff person, not involved in the inmates treatment, to speak in their behalf if the inmate wishes

- 1.3.2.5 The Committee will document it's decision as to the necessity of the admission in the inmate's medical record and the inmate will be advised of the determination.
  - If the Committee determines that the inmate is not in need of evaluation or treatment in the MHU, the inmate will be discharged.
- 1.3.2.6 The Interdisciplinary Committee will base its determination as to the need for admission upon three factors:
  - Whether the inmate poses an immediate risk to self or others;
  - Whether the inmate suffers from a mental illness or other significant psychiatric disorder such that immediate treatment in an MHU is necessary to prevent further deterioration of the inmate's condition;
  - Whether the inmate is in need of an evaluation conducted in the MHU to clarify the presence/absence of a mental disorder, and a need for treatment of any disorder that is identified.
- 1.3.2.7 Emergency transfer to the MHU may be made only as outlined in Section 1.7 of this regulation.
- 1.4 Transfers into the Mental Health Unit:
  - 1.4.1 The Classification Committee will complete the required classification documents:
    - Classification Instrument; and
    - NCIS Entry (prepared by the inmate's caseworker);
  - 1.4.2 The Chrono will contain a brief narrative of the process as it actually occurred.
    - This document will also indicate whether the proposed transfer is voluntary or involuntary, whether the classification requirements were satisfied and the degree and urgency involved in the transfer.
    - Members of the Committee will be listed in the NCIS entry.
  - 1.4.3 The Offender Management Division must be notified and approve of a nonemergency transfer between institutions. Refer to Section 1.7 of this regulation for emergency transfers.
  - 1.4.4 Degree of Urgency

- Mental health transfers will take priority over routine transfers.
- Transportation of very severely impaired inmates will be planned to minimize further deteriorization of their condition during movement. (3-4367)
- Inmates who are gravely disabled, those who are fragile, and inmates demonstrating bizarre behavior, will be moved singly or in small groups.
- If regular vans are used mental health transfers will take precedence over routine transfers.

## 1.4.5 Responsibility

- 1.4.5.1 In the case of local transfers, the institution/facility transfer coordinator will contact the MHU and advise regarding the transfer.
- 1.4.5.2 The transfer coordinator will make arrangements for the sending institution/facility to actually transfer the inmate.
- 1.4.5.3 If the sending institution/facility does not have available transportation resources to transfer the inmate, the transfer coordinator will contact the Central Transportation supervisor and request assistance.
- 1.4.5.4 In the case of transfers across the state, the institution/facility transfer coordinator will telephone the Central Transportation supervisor and the Offender Management Division and schedule the move for the next trip.
- 1.4.5.5 The transportation coordinator will also telephone the MHU and advise regarding the transfer.
- 1.5 Internal Institutional Housing Change to MHU, that involve only housing changes, rather than transfer, will be completed through the institutional classification process.

## 1.6 Forms

- 1.6.1 The process of Admission to the MHU involves these general steps:
  - Confirmation of need and determination of voluntary versus involuntary;
  - Actual transfer/housing change; and
  - These forms are filed in the inmate's medical record when completed.

# 1.7 Emergency Transfers

1.7.1 In case of emergency, where the Mental Health Team at the institution considered the

inmate an immediate, serious danger to themselves or others, the move may be made upon verbal approval by the Medical Director/designee.

- 1.7.2 The verbal approval must be documented.
- 1.7.3 This constitutes an admitting order.
- 1.7.4 Following an emergency transfer or internal institutional housing change, the inmate will be provided with a classification hearing within five (5) working days of the transfer.
- 1.7.5 Emergency transfers will be coordinated with the Central Transportation supervisor and notify the Offender Management Division.
- 1.8 Classification Procedures and Reviews:
  - 1.8.1 All inmates who are admitted and discharged from an MHU will be subject to the usual and required classification procedures that govern the movement of inmates within the Department.
  - 1.8.2 Frequency of review of classification will be in accordance with Department policy.
  - 1.8.3 In addition:
    - Inmates who are admitted on an involuntary basis, and remain in that status, will be reviewed by the Interdisciplinary Committee within thirty (30) days and every ninety (90) days thereafter, until voluntary status or discharge is achieved; and
    - Inmates in voluntary status will be reviewed as needed, or within 180 days.
- 1.9 Discharge from a Mental Health Unit
  - 1.9.1 An inmate will be discharged from an MHU when, in the opinion of the treatment staff, the inmate has achieved maximum treatment benefit, and is able to receive necessary treatment at a lower level of care.
  - 1.9.2 To be discharged the following steps are necessary:

- An order for discharge is given by a psychiatrist, physician or mid-level practitioner;
- Review and concurrence by the Interdisciplinary Classification Committee; and
- The inmate no longer falls into Category I or II as defined on the Initial Mental Health Classification Form, DOC-2667.
- 1.9.2 At each of the required classification hearings, if the inmate is not to be discharged and is in the unit involuntarily, the following will apply:
  - At the classification hearing, the information relied upon for the proposed continued confinement in the MHU will be disclosed to the inmate;
  - The inmate will be given the opportunity at the hearing to be heard in person and to present documentary evidence;
  - The psychologist/physician may make a recommendation to the Interdisciplinary Classification Committee;
  - The Committee may request additional or updated information as needed;
  - A second opinion of another psychologist/physician may be included in the evidence; and
  - The decision of the Committee and the reasons therefore will be documented in the NCIS.
- 1.9.3 Designation upon Discharge from the MHU
  - 1.9.3.1 Inmates discharged from the MHU will receive a discharge designation from the Interdisciplinary Classification Committee.
  - 1.9.3.2 If the designation involves a transfer from or retention at the institution where the MHU is located, this classification action requires approval from Offender Management Division.

#### REFERENCES

ACA Standards 3-4349, 3-4367, 3-4368, and 3-4369

## **ATTACHMENTS**

Initial Mental Health Classification, DOC-2667.	
Jackie Crawford, Director	Date
Ted D'Amico, D.O., Medical Director	Date
$\begin{array}{ccc} \textbf{CONFIDENTIAL} & & \underline{XX} \\ \overline{Yes} & & No \end{array}$	

THIS PROCEDURE SUPERSEDES ALL PRIOR WRITTEN PROCEDURES ON THIS SPECIFIC SUBJECT.